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## BIB DATA SHEET

CONFIRMATION NO. 3024

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/719,445		606	3721	02-414B

**APPLICANTS**

Edward W. Miller, Salem, OR;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*\* SMALL ENTITY \*\***

02/19/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		OR	2	12	2

**ADDRESS**

LAW OFFICE OF CARL. D. CROWELL  
 P. O. BOX 923  
 SALEM, OR 97308-0923  
 UNITED STATES

**TITLE**

Impact head assembly for percussive therapeutic device

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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